

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

101585,637

FILING DATE

7-7-2006

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1		1		1		
2						
3		2				
4	1		1			
5		1		1		
6		1		1		
7		1		1		
8		4		1		
9	1		1			
10		1		1		
11	1		1			
12	1		1			
13		1		1		
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50						
TOTAL IND.	5	↓	5	↓		↓
TOTAL DEP.	8	←	8	←		←
TOTAL CLAIMS	13		13			

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						